

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docking Number

09/809405

CLAIMS AS FILED - PART I

FOR	(Column 1)	(Column 2)	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))				
TOTAL CLAIMS (37 CFR 1.16(c))			minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))			minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				

SMALL ENTITY	
RATE	FEE
	\$
X \$	
X \$	
+ \$	

OTHER THAN SMALL ENTITY	
RATE	FEE
	\$
X \$	
X \$	
+ \$	

TOTAL

TOTAL

If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

12-30-05

	(Column 1)	(Column 2)	(Column 3)	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
AMENDMENT A					
	CLAIMS REMAINING AFTER AMENDMENT				
	Total (37 CFR 1.16(c))	14	Minus	20	=
	Independent (37 CFR 1.16(b))	1	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
AMENDMENT B					
	CLAIMS REMAINING AFTER AMENDMENT				
	Total (37 CFR 1.16(c))		Minus		=
	Independent (37 CFR 1.16(b))		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
AMENDMENT C					
	CLAIMS REMAINING AFTER AMENDMENT				
	Total (37 CFR 1.16(c))		Minus		=
	Independent (37 CFR 1.16(b))		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL ADD'L FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public, which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09-809405

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	15	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	15 minus 20 =	0
INDEPENDENT CLAIMS	1 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Amended	15	20	0
Independent	1	3	0
BEST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X50=		OR	X518=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	170

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50=		OR	X518=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50=		OR	X518=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50=		OR	X518=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

6-20-05

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Amended	15	20	0
Independent	1	3	0
BEST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

11-25-05

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Amended	14	20	0
Independent	1	3	0
BEST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

Enter 1 if less than the entry in column 2, write "0" in column 3.
 Number Previously Paid For in THIS SPACE is less than 20, enter "20."
 Number Previously Paid For in THIS SPACE is less than 3, enter "3."
 Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate list in column 1.

BEST AVAILABLE COPY